

SUPPLIER QUALITY QUESTIONNAIRE

Supplier's Name

Supplier's Address Tel No

..... Fax No

..... Email

.....

Managing Director

Quality Contact Position

Production Contact Position

Chief Inspector (if different from above)

Scope of Supply

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Other products or services offered in addition to those in scope of approval

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1. How does the quality control function fit within the organisation?

2. Is the company approved to a recognised quality systems standard? If so which?

16. To what extent, if any, is final inspection applied?

17. If potential or actual deviation from requirements occur, what is done to prevent future re-occurrence?

18. Are records kept of material batches and supplier? Yes/No

19. Can material traceability be offered? Yes/No

20. Can test results be made available to customers? Yes/No

21. Do you have ISO 9001 certificate? If so please attach Yes/No

22. Do you have AS9100/AS9120 certificate? If so please attach Yes/No

23. Do you have ISO 14001? If so please attach Yes/No

24. If No do you have any plans to achieve ISO 14001? Yes/No

25. We have received a copy of Instructions to Suppliers (Reliance Form QA0009) and confirm our ability to meet its requirements. Yes/No

(Note: This form is available on the internet at www.reliance.co.uk/QA0009.pdf)

Signed Position

Name Date